

Sponsor _____
 Name of Airport _____
 Fiscal Year Ended _____

OPERATING AND FINANCIAL SUMMARY

Operating Revenue

Airline and other aeronautical revenue

1. Landing Fees _____
2. Terminal/international arrival area rental or other charge _____
3. Apron charges/tiedowns _____
4. Fuel flowage fees _____
5. Utilities _____
6. FBO revenue: contract or sponsor-operated _____
7. Cargo and hangar rentals _____
8. Securities Reimbursement _____
9. Misc. (Should not exceed 5% of total aeronautical) _____
10. (Add other categories if applicable) _____

Total aeronautical revenue

Non-aeronautical

1. Rent/land rental _____
2. Concessions _____
3. Parking _____
4. Rental Cars _____
5. In-flight Catering _____
6. Interest Income _____
7. Royalties from natural resource sales _____
8. Misc. (Should not exceed 5% of total nonaeronautical) _____
9. (Add other categories if applicable) _____

Total non-aeronautical revenue

Total Operating Revenue

Non-Operating Revenue and Other Receipts

- Bond Proceeds _____
- Proceeds from sale of property not subject to Federal obligations _____
- Proceeds from sale of property subject to SPA/grant obligations _____
- Grant payments _____
- Passenger Facility Charges _____
- Other (Identify) _____

Total Non-Operating Revenue/other receipts

Total Revenue and Other Receipts

Operating Expenses

1. Personnel Compensation and Benefits _____
2. Communications and Utilities _____
3. Supplies, Materials, Repairs, Maintenance _____
4. Services (1) _____
5. Insurance and Claims _____
6. Government in lieu, permit, impact fees, etc. _____
7. Misc. (Should not exceed 5% of total op expenses) _____
8. (Add other categories if applicable) _____

Total Operating Expenditures

Debt Service Payments Net of Capitalized Interest

Transfers to Reserves

1. _____
2. _____

Total Reserve Transfers

Non-Operating Capital Expenditures

1. _____
2. _____

Total Capital Expenditures

Other Expenditures

1. _____
2. _____

Total Other

Total Non-Operating Expenditures

Total Expenditures

REVENUE SURPLUS (LOSS)

Guidance used for accounting (check one or more) GAAP:____ OMB Circular A-87____

(1) Services includes fees for other governmental services not included in other categories Cash basis____ Accrual____ Other____

In compliance with section 47107(a) of the Title 49 United States Code and section 111(b) of the Federal Aviation Administration Authorization Act of 1994.

Please complete this form in order assist the public in understanding airport finances and the use of airport generated revenue.

I certify that the information on this form is true and accurate to the best of my knowledge and belief.

Authorized Representative

Date

Title

FAA Form 5100-125 (xx)

AGENCY DISPLAY OF ESTIMATED BURDEN.

The FAA estimates that the average burden for this report form is 5 hours per response. You may submit any comments concerning the accuracy of this burden estimate or any suggestions for reducing the burden to the Office of Management and Budget. You may also send comments to the Federal Aviation Administration, Program Support Branch, ARP-11, 800 Independence Avenue, SW, Washington, DC 20591, Attention: OMB Number 2120-0557.